Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 1 of 58

| Fill in this information to identify your case: |                               |                                    |
|---|-------------------------------|------------------------------------|
| United States Bankruptcy Court for the:         |                               |                                    |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                    |
| Case number (if known)                          | Chapter you are filing under: |                                    |
|   | ☐ Chapter 7                   |                                    |
|   | ☐ Chapter 11                  |                                    |
|   | ☐ Chapter 12                  |                                    |
|   | ■ Chapter 13                  | Check if this an<br>amended filing |

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself  |                                       |   |
|-----|---|---------------------------------------|---|
|     |   | About Debtor 1:                       | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name  |                                       |   |
|     | Write the name that is  | on <b>George</b>                      |   |
|     | your government-issue picture identification (fo  | ed First name                         | First name                                    |
|     | example, your driver's  | D.                                    |   |
|     | license or passport).   | Middle name                           | Middle name                                   |
|     | Bring your picture  | Litke                                 |   |
|     | identification to your<br>meeting with the truste   | Loot name and Cuffix (Cr. Jr. II III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  | All other names you l   | nave                                  |   |
| ۷.  | used in the last 8 year   |                                       |   |
|     | Include your married of maiden names.   | r                                     |   |
| 3.  | Only the last 4 digits<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-4200                           |   |
|     |   |                                       |   |

Case 16-35077 Doc 1 Filed 11/02/16

Entered 11/02/16 14:46:04 Page 2 of 58

Desc Main 11/02/16 2:22PM Document Case number (if known) Debtor 1 George D. Litke

|    |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|---|---|--|
| 4. | Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years | ■ I have not used any business name or EINs.  | ☐ I have not used any business name or EINs.   |
|    | Include trade names and doing business as names   | Business name(s)  | Business name(s)   |
|    |   | EINs  | EINs   |
| 5. | Where you live  |   | If Debtor 2 lives at a different address:  |
|    |   | 18114 Roy St.<br>Lansing, IL 60438  |  |
|    |   | Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |
|    |   | Cook<br>County  | County   |
|    |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6. | Why you are choosing this district to file for  | Check one:  | Check one:   |
|    | bankruptcy  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|    |   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |   |   |  |

Case 16-35077 Doc 1 Filed 11/02/16

Entered 11/02/16 14:46:04

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

Desc Main

11/02/16 2:22PM

George D. Litke Debtor 1

Document

Page 3 of 58

Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12.

bankruptcy petition.

|         |                 | Document | Page 4 of 58 | 11/02/10 2.22FF |
|---------|-----------------|----------|--------------|-----------------|
| ahtar 1 | Goorgo D. Litko |          | Case numbe   | r (if known)    |

|      | Are you a sole proprietor of any full- or part-time business?   | ■ No.           | Go to              | o Part 4.   |
|------|---|-----------------|--------------------|---|
|      |   | ☐ Yes.          | Nam                | e and location of business  |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                 |                    | e of business, if any   |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |                 | Num                | ber, Street, City, State & ZIP Code   |
|      | it to this petition.  |                 | Chec               | ck the appropriate box to describe your business:   |
|      |   |                 |                    | Health Care Business (as defined in 11 U.S.C. § 101(27A))   |
|      |   |                 |                    | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))   |
|      |   |                 |                    | Stockbroker (as defined in 11 U.S.C. § 101(53A))  |
|      |   |                 |                    | Commodity Broker (as defined in 11 U.S.C. § 101(6))   |
|      |   |                 |                    | None of the above   |
|      | Bankruptcy Code and are you a <i>small business</i> debtor?  For a definition of <i>small</i>   | in 11 U.S       | .C. 1116           | flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 5(1)(B).  not filing under Chapter 11.                                  |
|      | business debtor, see 11 U.S.C. § 101(51D).  | □ No.           | I am<br>Code       | filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy e.  |
|      | 0.0.0. 3 101(012).  |                 |                    |   |
|      | 0.0.0.3 101(012).   | ☐ Yes.          | I am               | filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code   |
| Part |   |                 |                    | filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code   |
| Part |   |                 | Hazard             | filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code  ous Property or Any Property That Needs Immediate Attention  the hazard? |
|      | Report if You Own or  Do you own or have any property that poses or is alleged to pose a threat   | Have Any  ■ No. | Hazarde<br>What is | ous Property or Any Property That Needs Immediate Attention   |

Debtor 1 George D. Litke

Document Page 5 of 58 Case number (if known)

Part 5: E

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

11/02/16 2:22PM

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-35077

Debtor 1 George D. Litke

Entered 11/02/16 14:46:04 Page 6 of 58

Case number (if known)

Desc Main

Doc 1 Filed 11/02/16 Document

| Part | 6: Answer These Quest  | ions for R                              | eporting Purposes  |   |   |
|------|--|---|--|---|---|
| 16.  | What kind of debts do you have?                                | 16a.                                    | Are your debts primarily consulting individual primarily for a personal, |   | e defined in 11 U.S.C. § 101(8) as "incurred by an  |
|      |  |   | ☐ No. Go to line 16b.  |   |   |
|      |  |   | Yes. Go to line 17.  |   |   |
|      |  | 16b.                                    | Are your debts primarily busine money for a business or investme         |   |   |
|      |  |   | ☐ No. Go to line 16c.  |   |   |
|      |  |   | ☐ Yes. Go to line 17.  |   |   |
|      |  | 16c.                                    | State the type of debts you owe the                                      | at are not consumer debts or bus  | siness debts  |
| 17.  | Are you filing under Chapter 7?                                | ■ No.                                   | I am not filing under Chapter 7. Go                                      | o to line 18.   |   |
|      | Do you estimate that after any exempt property is excluded and | ☐ Yes.                                  | I am filing under Chapter 7. Do yo are paid that funds will be available |   | property is excluded and administrative expenses itors?   |
|      | administrative expenses are paid that funds will               |   | □ No   |   |   |
|      | be available for<br>distribution to unsecured<br>creditors?    |   | ☐ Yes  |   |   |
| 18.  | How many Creditors do you estimate that you owe?               | ■ 1-49<br>□ 50-99<br>□ 100-1<br>□ 200-9 | 99   | ☐ 1,000-5,000<br>☐ 5001-10,000<br>☐ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than100,000   |
| 19.  | How much do you estimate your assets to be worth?              | <b>\$</b> 100,                          | 50,000<br>01 - \$100,000<br>001 - \$500,000<br>001 - \$1 million         | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion |
| 20.  | How much do you estimate your liabilities to be?               | <b>1</b> \$100,                         | 50,000<br>101 - \$100,000<br>1001 - \$500,000<br>1001 - \$1 million      | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion |
| Part | 7: Sign Below  |   |  |   |   |
| For  | you  |   | •  |   | information provided is true and correct.   |
|      |  | United S                                | tates Code. I understand the relief                                      | available under each chapter, and   | d I choose to proceed under Chapter 7. is not an attorney to help me fill out this  |
|      |  |   | nt, I have obtained and read the not                                     |   |   |
|      |  | I request                               | relief in accordance with the chapter                                    | er of title 11, United States Code,   | , specified in this petition.   |
|      |  | bankrupt<br>and 3571                    | cy case can result in fines up to \$25                                   |   | ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,                            |
|      |  | George                                  | <b>D. Litke</b><br>e of Debtor 1   | Signature of D  | Debtor 2  |
|      |  | Executed                                | November 2, 2016  MM / DD / YYYY   | Executed on   | MM / DD / YYYY  |

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 7 of 58

Debtor 1 George D. Litke Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David M. Siegel  | Date          | November 2, 2016 |  |
|--|---------------|------------------|--|
| Signature of Attorney for Debtor                           |               | MM / DD / YYYY   |  |
| David M. Siegel Printed name                               |               |                  |  |
|  |               |                  |  |
| David M. Siegel & Associates Firm name                     |               |                  |  |
| 790 Chaddick Drive   |               |                  |  |
| Wheeling, IL 60090  Number, Street, City, State & ZIP Code |               |                  |  |
| Contact phone (847) 520-8100                               | Email address |                  |  |
| #06207611  |               |                  |  |
| Bar number & State   |               | <del></del>      |  |

DOCUMENT Page 8 of 58

Fill in this information to identify your case:

Debtor 1 George D. Litke
First Name Middle Name Last Name

Debtor 2 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

☐ Check if this is an amended filing

## Official Form 106Sum

Case number

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your a      | assets<br>of what you own |
|-----|--|-------------|---------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 183,000.00                |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 17,319.0                  |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 200,319.0                 |
| aı  | t 2: Summarize Your Liabilities  |             |                           |
|     |  |             | iabilities<br>nt you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 173,655.00                |
|     | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$          | 0.0                       |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 25,329.0                  |
|     | Your total liabilities   | \$          | 198,984.00                |
| Pai | t 3: Summarize Your Income and Expenses  |             |                           |
| ١.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 3,418.00                  |
| i.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 2,368.0                   |
| aı  | t 4: Answer These Questions for Administrative and Statistical Records   |             |                           |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ır other sc | hedules.                  |
|     | ■ Yes  |             |                           |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

Document Page 9 of 58
Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 George D. Litke

| From Part 4 on Schedule E/F, copy the following:   | Total cl | aim  |
|--|----------|------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$       | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$       | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$       | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$       | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$       | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$      | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$       | 0.00 |

|                              | Ca  | ıse 16-35077                                | Doc 1                | _            | 11/02/16<br>ument                          | Entered 11/02/<br>Page 10 of 58  | 16 14:46:04  | Desc         | Main                            | 2/16 2:22P <b>i</b> |
|------------------------------|---|---|----------------------|--------------|--|--|--|--------------|---------------------------------|---------------------|
| Filli                        | in this inforn                              | nation to identify y                        | our case and th      |              |  |  |  |              |                                 |                     |
| Deb                          | tor 1                                       | George D. Lit                               |                      | e Name       |  | Last Name  |  |              |                                 |                     |
|                              | tor 2<br>use, if filing)                    | First Name                                  | Middle               | Name         |  | Last Name  |  |              |                                 |                     |
| Unit                         | ed States Ba                                | nkruptcy Court for t                        | he: NORTHER          | N DIST       | RICT OF ILLIN                              | IOIS   |  |              |                                 |                     |
| Cas                          | e number _                                  |   |                      |              |  | -  |  |              | Check if thi amended fi         |                     |
| SC<br>n ead<br>hink<br>nforr | chedul<br>ch category, s<br>it fits best. B | e as complete and a<br>e space is needed, a | scribe items. List a | e. If two    | married people                             | n asset fits in more than or<br>are filing together, both ar<br>e top of any additional page | e equally responsib                                      | le for supp  | category when                   |                     |
| Part                         | _   |   | ilding, Land, or Ot  | her Real     | Estate You Ow                              | n or Have an Interest In   |  |              |                                 |                     |
| . Do                         | you own or h                                | nave any legal or equ                       | itable interest in a | ny reside    | ence, building,                            | land, or similar property?   |  |              |                                 |                     |
|                              | No. Go to Par                               | t 2.  |                      |              |  |  |  |              |                                 |                     |
|                              | Yes. Where is                               | s the property?                             |                      |              |  |  |  |              |                                 |                     |
|                              |   |   |                      | <b>NA</b> 11 |  | •  |  |              |                                 |                     |
| 1.1                          | 18114 Roy                                   | / Street                                    |                      | What         |  | ? Check all that apply   |  |              |                                 |                     |
|                              |   | if available, or other desc                 | ription              |              | Single-family h Duplex or mult Condominium | i-unit building  | Do not deduct se<br>the amount of an<br>Creditors Who Ha | y secured cl | aims on <i>Śchedu</i>           | ıle D:              |
|                              | Lansing                                     | IL  | 60438-0000           |              | Manufactured<br>Land                       | or mobile home   | Current value of entire property?                        | F            | Current value of ortion you owr | n?                  |
|                              | City  | State                                       | ZIP Code             |              | Investment pro<br>Timeshare<br>Other       | pperty   | \$108,00<br>Describe the na<br>(such as fee sim          | ture of you  |                                 | erest               |
|                              |   |   |                      | Who I        | has an interest<br>Debtor 1 only           | in the property? Check one   | a life estate), if k                                     |              | y by the entire                 | iles, oi            |
|                              | Cook  |   |                      |              | Debtor 2 only                              |  |  |              |                                 |                     |
|                              | County                                      |   |                      |              |  | the debtors and another  | (see instruction   |              | nity property                   |                     |
|                              |   |   |                      | Other        | information yo                             | ou wish to add about this it   | em, such as local  |              |                                 |                     |

Official Form 106A/B Schedule A/B: Property page 1

property identification number:

Case 16-35077

| .2                   |  |  |   |  |  |   |
|----------------------|--|--|---|--|--|---|
| :                    | 2001 E. Elm Str  | eet  |   | ■ Single-family home   | Do not deduct secured cla  | aims or exemptions. Put   |
| -                    | Street address, if availab   | le, or other des   | scription   | Dupley or multi unit building  | the amount of any secure   | ed claims on Schedule D:  |
|                      |  |  |   | Condominium or cooperative   | Creditors Who Have Clai  | ms Secured by Property.   |
|                      |  |  |   |  |  |   |
|                      | Griffith   | IN   | 46310-0000  | Manufactured or mobile home  | Current value of the   | Current value of the  |
| -                    |  |  | 46319-0000  | Land   | entire property?   | portion you own?  |
| (                    | City   | State  | ZIP Code  | ☐ Investment property ☐ Timeshare  | \$75,000.00  | \$75,000.00   |
|                      |  |  |   | ☐ Timeshare ☐ Other  |  | our ownership interest  |
|                      |  |  |   | Who has an interest in the property? Check one   |  | nancy by the entireties, or   |
|                      |  |  |   | Debtor 1 only  | Fee simple   |   |
|                      | Lake   |  |   | Debtor 2 only  | <del></del>  |   |
| _                    | County   |  |   | Debtor 1 and Debtor 2 only   |  |   |
|                      | ,  |  |   | At least one of the debtors and another  | Check if this is con (see instructions)  | nmunity property  |
|                      |  |  |   | Other information you wish to add about this i   | ,  |   |
|                      |  |  |   | property identification number:  | itelli, sucii as local   |   |
|                      |  |  |   | Debtor is on title/mortgage. Renters   | makes mortgage pavr  | ments directly to   |
|                      |  |  |   | lender.  | makee mertgage payr  | nonto an cotty to   |
| p                    | ages you have at   | tached for   |   | for all of your entries from Part 1, including a at number here  |  | \$183,000.00  |
| po yo med            | Describe Your Voluments of the provided HTML Reserved To the else drives. If your voluments of the provided HTML Reserved To t | tached for<br>ehicles<br>nave legal<br>you lease a<br>ractors, sp  | or equitable into vehicle, also report utility vehic                      | erest in any vehicles, whether they are registerent it on Schedule G: Executory Contracts and Lates, motorcycles  Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only   | ered or not? Include any v Unexpired Leases.  Do not deduct secured c the amount of any secure   | ehicles you own that  |
| po yoo<br>omed<br>Ca | Describe Your Voluments of the property of the | tached for<br>ehicles<br>nave legal<br>you lease a<br>ractors, sp  | or equitable into vehicle, also report utility vehic                      | erest in any vehicles, whether they are registered it on Schedule G: Executory Contracts and Lates, motorcycles  Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only   | Do not deduct secured of the amount of any secure Creditors Who Have Class   | ehicles you own that laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the   |
| po yo med            | Describe Your Voluments of the provided HTML Reserved To the else drives. If your voluments of the provided HTML Reserved To t | tached for<br>ehicles<br>nave legal<br>you lease a<br>ractors, sp  | or equitable into vehicle, also report utility vehic                      | erest in any vehicles, whether they are registerent it on Schedule G: Executory Contracts and Lates, motorcycles  Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only   | Do not deduct secured of the amount of any secure Creditors Who Have Class   | ehicles you own that laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the   |
| po yo med            | Describe Your Voluments of the lease of the  | tached for ehicles  nave legal of the control of th | or equitable into vehicle, also report utility vehic                      | erest in any vehicles, whether they are register ort it on Schedule G: Executory Contracts and Lates, motorcycles  Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property   | Do not deduct secured of the amount of any secure Creditors Who Have Class  Current value of the entire property?  \$9,250.00  Do not deduct secured of the amount of any secure creditors who have Class contains the entire property?  | laims or exemptions. Put ed claims on Schedule Drims Secured by Property.  Current value of the portion you own?  \$9,250.00  |
| pyoyo Ca             | Describe Your Voluments of the provided House of the provided Hous | tached for ehicles  nave legal of the control of th | Part 1. Write that  | erest in any vehicles, whether they are register out it on Schedule G: Executory Contracts and Lates, motorcycles  Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | Do not deduct secured of the amount of any secure Creditors Who Have Class  Current value of the entire property?  \$9,250.00  Do not deduct secured of the amount of any secure creditors who have Class contains the entire property?  | ehicles you own that  laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$9,250.00   |
| pyo yo med Ca        | Describe Your Voluments of the property of the | tached for ehicles  nave legal of our lease a aractors, sp   | Part 1. Write that  | erest in any vehicles, whether they are registered in the solution of the solu | Do not deduct secured of the amount of any secure Creditors Who Have Class.  Do not deduct secured of the amount of the entire property?  \$9,250.00  Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the amount of any secure Creditors Who Have Class Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$9,250.00  laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the |
| pyomed Ca            | Describe Your Voluments of the property of the | tached for ehicles  nave legal of our lease a aractors, sp   | Part 1. Write that or equitable into vehicle, also rep port utility vehic | erest in any vehicles, whether they are register ort it on Schedule G: Executory Contracts and Louis Ites, motorcycles  Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only  | Do not deduct secured of the amount of any secure creditors Who Have Class.  Do not deduct secured of the amount of the entire property?  \$9,250.00  Do not deduct secured of the amount of any secure creditors Who Have Class   | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$9,250.00  laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.                       |
| pyoynec Ca           | Describe Your Voluments of the property of the | tached for ehicles  nave legal of our lease a aractors, sp   | Part 1. Write that or equitable into vehicle, also rep port utility vehic | erest in any vehicles, whether they are register ort it on Schedule G: Executory Contracts and Lates, motorcycles  Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only  | Do not deduct secured of the amount of any secure Creditors Who Have Class.  Do not deduct secured of the amount of the entire property?  \$9,250.00  Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the amount of any secure Creditors Who Have Class Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$9,250.00  laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the |

Debtor 1

George D. Litke

| 5.1.   |              | Case 16-350  |             | Doc 1         | Filed 11/02/16<br>Document                     | Entered 11/02/16 14:46:04<br>Page 12 of 58                              | Desc Main 11/02/16 2:22PM  |
|--------|--------------|--|-------------|---------------|--|---|--|
| Debt   | tor 1        | George D. Litke  | )           |               |  | Case number (if known   |  |
|        |              |  |             |               |  | cles, other vehicles, and accessories ownobiles, motorcycle accessories |  |
|        | No           |  |             |               |  |   |  |
|        | Yes          |  |             |               |  |   |  |
|        |              |  |             |               |  |   |  |
|        |              |  |             |               |  | om Part 2, including any entries for=>                                  | \$10,675.00  |
| Part : | 3: Des       | scribe Your Personal a   | and Hou     | sehold Items  | •  |   |  |
| Do y   | ou ow        | n or have any lega   | l or equi   | table intere  | est in any of the follow                       | ing items?  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| E      | xample<br>No | old goods and furnings: Major appliances  Describe                       |             | e, linens, ch | iina, kitchenware                              |   |  |
|        |              | [ <del></del>  |             |               |  |   | <b>¢</b> 500.00  |
|        |              | _H   | ouseho      | old Goods     | & Furniture                                    |   | \$500.00   |
|        | ] No         |  |             |               | stereo, and digital equip<br>ia players, games | oment; computers, printers, scanners; music                             | collections; electronic devices  |
|        |              | T  | V & Ele     | ctronics      |  |   | \$600.00   |
| E      | xample<br>No | oles of value<br>es: Antiques and figu<br>other collections,<br>Describe |             |               |  | oks, pictures, or other art objects; stamp, coi                         | n, or baseball card collections;   |
| E      |              | ent for sports and hes: Sports, photograp<br>musical instrume            | phic, exe   | ercise, and c | other hobby equipment;                         | bicycles, pool tables, golf clubs, skis; canoes                         | s and kayaks; carpentry tools;   |
|        |              | Describe   |             |               |  |   |  |
|        | No           |  | notguns,    | ammunition    | , and related equipment                        | :   |  |
|        | l No         | les: Everyday clothe   | es, furs, l | eather coats  | s, designer wear, shoes                        | accessories   |  |
|        | Yes.         | Describe   |             |               |  |   |  |
|        |              | N  | ormal (     | Clothing      |  |   | \$400.00   |
|        |              |  |             |               |  |   |  |

12. **Jewelry** 

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

■ N

☐ Yes. Describe.....

Desc Main Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Page 13 of 58

Case number (if known) Document Debtor 1 George D. Litke 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$50.00 Dog and Three Cats 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,550.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Checking Account Chase Bank** \$200.00 Checking 17.1. **Savings Account Chase Bank** \$30.00 Savings 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  $\hfill \square$  Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No

Institution name:

Type of account:

Yes. List each account separately.

Case 16-35077 Doc 1

Pension

Filed 11/02/16 Document

Entered 11/02/16 14:46:04

Desc Main

Debtor 1

George D. Litke

Page 14 of 58

Case number (if known)

**ERISA Qualified** \$364.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. ..... Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Whole Life Insurance brother \$4,500.00

Case 16-35077

Debtor 1 George D. Litke

|              |  |                             | ,                             |                          |
|--------------|--|-----------------------------|-------------------------------|--------------------------|
|              | Any interest in property that is due you from someone who has<br>If you are the beneficiary of a living trust, expect proceeds from a lif<br>someone has died. |                             | are currently entitled to rec | ceive property because   |
|              | No   |                             |                               |                          |
|              | Yes. Give specific information   |                             |                               |                          |
| _            | Claims against third parties, whether or not you have filed a law<br>Examples: Accidents, employment disputes, insurance claims, or ri                         |                             | and for payment               |                          |
|              | No<br>Yes. Describe each claim   |                             |                               |                          |
| 34 (         | Other contingent and unliquidated claims of every nature, inclu  | ıdina counterclaims (       | of the debtor and rights t    | o set off claims         |
| _            | No   | annig countries of          |                               |                          |
|              | l Yes. Describe each claim   |                             |                               |                          |
|              | Any financial assets you did not already list  |                             |                               |                          |
|              | No   |                             |                               |                          |
| L            | Yes. Give specific information   |                             |                               |                          |
| 36.          | Add the dollar value of all of your entries from Part 4, includin for Part 4. Write that number here   |                             |                               | \$5,094.00               |
|              |  |                             |                               |                          |
| Part         | 5: Describe Any Business-Related Property You Own or Have an Inter   | rest In. List any real esta | te in Part 1.                 |                          |
| 37. <b>D</b> | o you own or have any legal or equitable interest in any business-relate   | ed property?                |                               |                          |
|              | No. Go to Part 6.  |                             |                               |                          |
|              | Yes. Go to line 38.  |                             |                               |                          |
|              |  |                             |                               |                          |
| Part         | 6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.                               | Own or Have an Interes      | st In.                        |                          |
| 46. <b>[</b> | Oo you own or have any legal or equitable interest in any farm-  | or commercial fishin        | g-related property?           |                          |
|              | No. Go to Part 7.  |                             |                               |                          |
|              | Yes. Go to line 47.  |                             |                               |                          |
|              |  |                             |                               |                          |
| Part         | 7: Describe All Property You Own or Have an Interest in That You   | u Did Not List Above        |                               |                          |
|              | Oo you have other property of any kind you did not already list<br>Examples: Season tickets, country club membership   | ?                           |                               |                          |
|              | No   |                             |                               |                          |
|              | Yes. Give specific information   |                             |                               |                          |
| 54.          | Add the dollar value of all of your entries from Part 7. Write th  | at number here              |                               | \$0.00                   |
| Part         | 8: List the Totals of Each Part of this Form   |                             |                               |                          |
| 55.          | Part 1: Total real estate, line 2  |                             |                               | \$183,000.00             |
| 56.          | Part 2: Total vehicles, line 5   | \$10,675.00                 |                               | Ψ100,000.00              |
| 57.          | Part 3: Total personal and household items, line 15  | \$1,550.00                  |                               |                          |
| 58.          | Part 4: Total financial assets, line 36  | \$5,094.00                  |                               |                          |
| 59.          | Part 5: Total business-related property, line 45   | \$0.00                      |                               |                          |
| 60.          | Part 6: Total farm- and fishing-related property, line 52  | \$0.00                      |                               |                          |
| 61.          | Part 7: Total other property not listed, line 54 +   | \$0.00                      |                               |                          |
| 62.          | Total personal property. Add lines 56 through 61   | \$17,319.00                 | Copy personal property        | total <b>\$17,319.00</b> |
| 63.          | Total of all property on Schedule A/B. Add line 55 + line 62   |                             |                               | \$200.319.00             |

|                        |                          | Docume            | nt Page 16 of 58 | 11/02/10 2.2211                      |
|------------------------|--------------------------|-------------------|------------------|--------------------------------------|
| Fill in this infor     | mation to identify your  | case:             |                  |                                      |
| Debtor 1               | George D. Litke          |                   |                  |                                      |
|                        | First Name               | Middle Name       | Last Name        |                                      |
| Debtor 2               |                          |                   |                  |                                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name        |                                      |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |                                      |
| Case number (if known) |                          |                   |                  | ☐ Check if this is an amended filing |
|                        |                          |                   |                  |                                      |

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exemp | tions are you claimin | g? Check one only. | even if your spous | e is filing with you |
|----|--------------------|-----------------------|--------------------|--------------------|----------------------|
|    |                    |                       |                    |                    |                      |

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| 1     |
|-------|
|       |
| 01(b) |
|       |
| 01(c) |
|       |
| 01(b) |
|       |
| 01(b) |
|       |
| )     |

Debtor 1 George D. Litke

Document Page 17 of 58
Case number (if known)

|    | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo    | ount of the exemption you claim                                 | Specific laws that allow exemption |
|----|---|--------------------------------------|--------|---|------------------------------------|
|    | Concurre 2/2 that hote this property  | Copy the value from<br>Schedule A/B  | Che    | ck only one box for each exemption.                             |                                    |
|    | Normal Clothing Line from Schedule A/B: 11.1  | \$400.00                             |        | \$400.00  | 735 ILCS 5/12-1001(a)              |
|    | Line from Scriedule A/B: 11.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Dog and Three Cats Line from Schedule A/B: 13.1                                     | \$50.00                              |        | \$50.00   | 735 ILCS 5/12-1001(b)              |
|    | Line nom schedule AVB. 19.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Checking: Checking Account Chase Bank   | \$200.00                             |        | \$200.00  | 735 ILCS 5/12-1001(b)              |
|    | Line from Schedule A/B: 17.1  |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Savings: Savings Account<br>Chase Bank  | \$30.00                              |        | \$30.00   | 735 ILCS 5/12-1001(b)              |
|    | Line from Schedule A/B: 17.2  |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Pension: ERISA Qualified Line from Schedule A/B: 21.1                               | \$364.00                             |        | \$364.00  | 735 ILCS 5/12-1006                 |
|    | Lille Holli Schedule AV.B. 21.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Whole Life Insurance<br>Beneficiary: brother  | \$4,500.00                           |        | \$2,620.00  | 735 ILCS 5/12-1001(b)              |
|    | Line from Schedule A/B: 31.1  |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every  |                                      |        | led on or after the date of adjustme                            | nt.)                               |
|    | No  |                                      |        |   |                                    |
|    | Yes. Did you acquire the property covere  | ed by the exemption wi               | thin 1 | ,215 days before you filed this case                            | ?                                  |
|    | □ No  |                                      |        |   |                                    |
|    | ☐ Yes   |                                      |        |   |                                    |

Document Page 18 of 58 Fill in this information to identify your case: Debtor 1 George D. Litke Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. claim Describe the property that secures the claim: Cook County Clerk \$3,800.00 \$108,000.00 \$1,092.00 Creditor's Name 18114 Roy Street Lansing, IL 60438 **Cook County** 118 N. Clark St., Room As of the date you file, the claim is: Check all that 112 Chicago, IL 60602-1332 □ Contingent Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit **Non-Purchase Money Security** ☐ Check if this claim relates to a Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number **Ditech Financial LLC** Describe the property that secures the claim: \$105,292.00 \$108,000.00 \$0.00 Creditor's Name 18114 Roy Street Lansing, IL 60438 Cook County As of the date you file, the claim is: Check all that **PO BOX 6172** Rapid City, SD 57709 ☐ Contingent ☐ Unliquidated Number, Street, City, State & Zip Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured) ■ Debtor 1 only car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a Mortgage Other (including a right to offset) community debt

Official Form 106D

Date debt was incurred

Last 4 digits of account number

0211

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 19 of 58  $^{11/02/16}$ 

| Debtor 1 Georg                       | je D. Litke            |   | Cas                | se number (if know) |              |             |
|--------------------------------------|------------------------|---|--------------------|---------------------|--------------|-------------|
| First Name                           |                        | Name Last Name                                    | <del>_</del>       |                     |              |             |
| 2.2 Ditoob Fine                      | ancial LLC             | Describe the property that secures                | the eleims         | \$0.00              | ¢100 000 00  | \$0.00      |
| 2.3 Ditech Final Creditor's Name     |                        |   |                    | \$0.00              | \$108,000.00 | <u> </u>    |
| organor o riamo                      |                        | 18114 Roy Street Lansing, I<br>Cook County        | L 60436            |                     |              |             |
| DO BOY 6                             | 470                    | As of the date you file, the claim is:            | Check all that     |                     |              |             |
| PO BOX 61                            | , SD 57709             | apply.  |                    |                     |              |             |
|                                      |                        | Contingent  |                    |                     |              |             |
| Number, Street,                      | City, State & Zip Code | Unliquidated                                      |                    |                     |              |             |
| Mha awaa tha dah                     | <b>L42</b> OL 1        | Disputed  |                    |                     |              |             |
| Who owes the dek                     | Dt? Check one.         | Nature of lien. Check all that apply.             |                    |                     |              |             |
| Debtor 1 only                        |                        | An agreement you made (such as car loan)          | mortgage or secure | ed                  |              |             |
| Debtor 2 only                        |                        | _   |                    |                     |              |             |
| Debtor 1 and Deb                     | •                      | Statutory lien (such as tax lien, me              | echanic's lien)    |                     |              |             |
| _                                    | e debtors and another  | ☐ Judgment lien from a lawsuit                    |                    |                     |              |             |
| ☐ Check if this cla<br>community deb |                        | Other (including a right to offset)               | Mortgage Arr       | ears                |              |             |
| Date debt was incu                   | irred                  | Last 4 digits of account num                      | nber               |                     |              |             |
| 2.4 Ford Moto                        | r Credit               | Describe the property that secures                | the claim:         | \$20,542.00         | \$9,250.00   | \$11,292.00 |
| Creditor's Name                      |                        | 2015 Ford Focus                                   |                    |                     |              |             |
|                                      |                        |   |                    |                     |              |             |
|                                      |                        | As of the date you file, the claim is:            | Chack all that     |                     |              |             |
| PO Box 54                            |                        | apply.  | Crieck all triat   |                     |              |             |
| Omaha, NE                            |                        | Contingent  |                    |                     |              |             |
| Number, Street,                      | City, State & Zip Code | Unliquidated                                      |                    |                     |              |             |
| Who owes the deb                     | h42 Ob l               | Disputed  |                    |                     |              |             |
| Who owes the dek                     | bur Check one.         | Nature of lien. Check all that apply.             |                    |                     |              |             |
| Debtor 1 only                        |                        | An agreement you made (such as car loan)          | mortgage or secure | ed .                |              |             |
| Debtor 2 only                        |                        | _   |                    |                     |              |             |
| Debtor 1 and Deb                     | •                      | ☐ Statutory lien (such as tax lien, me            | echanic's lien)    |                     |              |             |
| _                                    | e debtors and another  | ☐ Judgment lien from a lawsuit                    | Daniel and Mar     |                     |              |             |
| ☐ Check if this cla<br>community deb |                        | Other (including a right to offset)               | Purchase Mo        | ney Security        |              |             |
| Date debt was incu                   | orred <u>04/15</u>     | Last 4 digits of account num                      | 5174               |                     |              |             |
| 2.5 Texas Ban                        | nk Mortage CO          | Describe the property that secures                | the claim:         | \$44,021.00         | \$75,000.00  | \$0.00      |
| Creditor's Name                      |                        | 2001 E. Elm Street Griffith,                      | IN 46319           | <u> </u>            | <u> </u>     |             |
|                                      |                        | Lake County                                       |                    |                     |              |             |
|                                      |                        | Debtor is on title/mortgage.                      |                    |                     |              |             |
|                                      |                        | makes mortgage payments                           | directly           |                     |              |             |
|                                      |                        | to lender. As of the date you file, the claim is: | Chack all that     |                     |              |             |
| PO BOX 10                            |                        | apply.  | Crieck all triat   |                     |              |             |
|                                      | n, TX 76185            | Contingent  |                    |                     |              |             |
| Number, Street,                      | City, State & Zip Code | ☐ Unliquidated                                    |                    |                     |              |             |
|                                      |                        | Disputed  |                    |                     |              |             |
| Who owes the dek                     | bt? Check one.         | Nature of lien. Check all that apply.             |                    |                     |              |             |
| Debtor 1 only                        |                        | An agreement you made (such as                    | mortgage or secure | ed                  |              |             |
| Debtor 2 only                        |                        | car loan)   |                    |                     |              |             |
| Debtor 1 and Deb                     |                        | Statutory lien (such as tax lien, me              | echanic's lien)    |                     |              |             |
|                                      | e debtors and another  | ☐ Judgment lien from a lawsuit                    |                    |                     |              |             |
| Check if this cla                    |                        | Other (including a right to offset)               | Mortgage           |                     |              |             |
| Date debt was incu                   | irred 05/2011          | Last 4 digits of account num                      | ber <u>2830</u>    |                     |              |             |

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 20 of 58  $^{11/02/16}$ 

|                  |   |   |   | 8   |
|------------------|---|---|---|---|
| Debto            | r1 George D. Litke  |   |   | Case number (if know)   |
|                  | First Name  | Middle Name                                     | Last Name   |   |
| If thi           | •   |   | this page. Write that number halue totals from all pages. | \$173,655.00<br>\$173,655.00  |
| Part 2           | List Others to Be N   | otified for a Debt TI                           | nat You Already Listed                                    |   |
| trying<br>than o | to collect from you for a                                       | lebt you owe to some<br>debts that you listed i | one else, list the creditor in Pa                         | ebt that you already listed in Part 1. For example, if a collection agency is<br>Part 1, and then list the collection agency here. Similarly, if you have more<br>reditors here. If you do not have additional persons to be notified for any |
|                  | Name, Number, Street, Cit<br>Cook County Clerk                  | y, State & Zip Code                             |   | On which line in Part 1 did you enter the creditor?   |
|                  | 718 E 88th Place<br>Chicago, IL 60619                           |   |   | Last 4 digits of account number   |
|                  | Name, Number, Street, Cit<br>Cook County Treas                  | •   |   | On which line in Part 1 did you enter the creditor?   |
|                  | PO Box 4488<br>Carol Stream, IL 60                              | 197-4488  |   | Last 4 digits of account number   |
|                  | Name, Number, Street, Cit<br>Cook County Treas                  | •   |   | On which line in Part 1 did you enter the creditor?   |
|                  | PO Box 4468<br>Carol Stream, IL 60                              | 197-4468  |   | Last 4 digits of account number   |
|                  | Name, Number, Street, Cit<br>Cook County Treas                  |   |   | On which line in Part 1 did you enter the creditor?   |
|                  | Legal Department<br>118 North Clark Stre<br>Chicago, IL 60602-1 | •   |   | Last 4 digits of account number   |

|                     | Case                                  | 16-35077                                   | DOC 1 F            | ilea 11/02/10<br>Document   | o Entere<br><u>Page 2</u> | 20 11/02/16 14:46:0<br>1 of 58   | 4 Desc           | c Main       | 11/02/16 2:22PM |
|---------------------|---------------------------------------|--|--------------------|-----------------------------|---------------------------|--|------------------|--------------|-----------------|
| Fill in             | this informati                        | ion to identify yoເ                        | r case:            | 170.0.111110.111            | 1 71111.7                 | 1 (11 510)   |                  |              |                 |
| Debto               | or 1                                  | George D. Litke                            |                    |                             |                           |  |                  |              |                 |
| Bobio               | _                                     | First Name                                 | Middle N           | lame                        | Last Name                 |  |                  |              |                 |
| Debto               | _                                     | First Name                                 | Middle N           | lama.                       | Loot Nome                 |  |                  |              |                 |
| Spouse              | e if, filing)                         | riist Name                                 | Middle N           | vame                        | Last Name                 |  |                  |              |                 |
| United              | d States Bankri                       | uptcy Court for the:                       | NORTHER            | N DISTRICT OF IL            | LINOIS                    |  |                  |              |                 |
| Case                | number                                |  |                    |                             |                           |  |                  |              |                 |
| (if know            | /n)                                   |  |                    | _                           |                           |  | ☐ Ch             | eck if this  | is an           |
|                     |                                       |  |                    |                             |                           |  | am               | nended filir | ıg              |
| Offic               | ial Form 1                            | 106F/F                                     |                    |                             |                           |  |                  |              |                 |
|                     |                                       | : Creditors \                              | Who Have           | Unsecured                   | Claims                    |  |                  | 12           | 2/15            |
|                     |                                       |  |                    |                             |                           | Part 2 for creditors with NONPR  | RIORITY claim    |              |                 |
| Schedu<br>left. Att | ule D: Creditors                      | Who Have Claims S<br>lation Page to this p | ecured by Prope    | rty. If more space is       | needed, copy              | any creditors with partially sec<br>the Part you need, fill it out, nu<br>do not file that Part. On the top        | mber the entr    | ies in the b | oxes on the     |
| Part 1              | List All of                           | f Your PRIORITY                            | Jnsecured Cla      | ims                         |                           |  |                  |              |                 |
| _                   |                                       | have priority unsecu                       | red claims again   | st you?                     |                           |  |                  |              |                 |
|                     | No. Go to Part 2                      | 2.   |                    |                             |                           |  |                  |              |                 |
|                     | Yes.                                  |  |                    |                             |                           |  |                  |              |                 |
| Part 2              |                                       | f Your NONPRIOR                            |                    |                             |                           |  |                  |              |                 |
|                     | •                                     | nave nonpriority uns                       |                    | _                           |                           |  |                  |              |                 |
|                     | No. You have n                        | othing to report in this                   | part. Submit this  | form to the court with      | n your other sch          | edules.  |                  |              |                 |
|                     | Yes.                                  |  |                    |                             |                           |  |                  |              |                 |
| un<br>tha           | nsecured claim, lis                   | st the creditor separa                     | ely for each claim | . For each claim liste      | d, identify what          | b holds each claim. If a creditor I<br>type of claim it is. Do not list claim<br>three nonpriority unsecured clain | is already inclu | ıded in Part | 1. If more      |
|                     |                                       |  |                    |                             |                           |  |                  | Total claim  | 1               |
| 4.1                 | Cap One                               |  |                    | Last 4 digits of ac         | count number              | 0892   | _                | :            | \$5,436.00      |
|                     | Nonpriority Cre Bankruptc             |  |                    | When was the deb            | ot incurred?              | 5/11 - 8/16  |                  |              |                 |
|                     | PO Box 30                             |  |                    | Wileii was tile det         | n incurreu :              | 3/11-0/10  |                  |              |                 |
|                     | Salt Lake (                           | City, UT 84130-0                           | 285                |                             |                           |  |                  |              |                 |
|                     |                                       | t City State Zlp Code                      |                    | As of the date you          | file, the claim           | is: Check all that apply   |                  |              |                 |
|                     | _                                     | I the debt? Check on                       | e.                 |                             |                           |  |                  |              |                 |
|                     | Debtor 1 o                            | -  |                    | Contingent                  |                           |  |                  |              |                 |
|                     | Debtor 2 o                            | •  |                    | ☐ Unliquidated              |                           |  |                  |              |                 |
|                     |                                       | nd Debtor 2 only                           |                    | ☐ Disputed  Type of NONPRIO | RITY unsecure             | d claim:   |                  |              |                 |
|                     |                                       | e of the debtors and a                     |                    | Student loans               | unscoule                  | w visitli.   |                  |              |                 |
|                     | debt                                  | his claim is for a co<br>ubject to offset? | minumity           |                             | •                         | aration agreement or divorce that  | you did not      |              |                 |
|                     | ■ No                                  |  |                    |                             |                           | ng plans, and other similar debts  |                  |              |                 |
|                     | ☐ Yes                                 |  |                    | Other. Specify              | Purchases                 |  |                  |              |                 |
|                     | · · · · · · · · · · · · · · · · · · · |  |                    |                             |                           |  |                  |              |                 |

Document

Page 22 of 58 Case number (if know)

| Debtor | George D. Litke   |   | Case number (if know)                        |            |
|--------|---|---|--|------------|
| 4.2    | Chase   | Last 4 digits of account number                               | 6316   | \$4,199.00 |
|        | Nonpriority Creditor's Name Attn: Bankruptcy Dept 800 Brooksedge Blvd Westerville, OH 43081 | When was the debt incurred?                                   | 5/11 - 8/16                                  |            |
|        | Number Street City State ZIp Code  Who incurred the debt? Check one.                        | As of the date you file, the claim i                          | s: Check all that apply                      |            |
|        | ■ Debtor 1 only   | ☐ Contingent  |  |            |
|        | ☐ Debtor 2 only   | ☐ Unliquidated  |  |            |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|        | $\square$ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                 | I claim:                                     |            |
|        | ☐ Check if this claim is for a community  | ☐ Student loans   |  |            |
|        | debt Is the claim subject to offset?  | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not |            |
|        | ■ No  | Debts to pension or profit-sharin                             | g plans, and other similar debts             |            |
|        | Yes   | Other. Specify Purchases                                      |  |            |
| 4.3    | Discover Bank Nonpriority Creditor's Name   | Last 4 digits of account number                               | 2059   | \$9,622.00 |
|        | PO Box 15316<br>Wilmington, DE 19850  | When was the debt incurred?                                   | 12/97 - 8/16                                 |            |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.                         | As of the date you file, the claim i                          | s: Check all that apply                      |            |
|        | ■ Debtor 1 only   | ☐ Contingent  |  |            |
|        | ☐ Debtor 2 only   | ☐ Unliquidated  |  |            |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|        | $\square$ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                 | I claim:                                     |            |
|        | ☐ Check if this claim is for a community debt   | ☐ Student loans ☐ Obligations arising out of a sepa           | ration agreement or divorce that you did not |            |
|        | Is the claim subject to offset?   | report as priority claims                                     |  |            |
|        | No  | Debts to pension or profit-sharin                             | g plans, and other similar debts             |            |
|        | Yes   | Other. Specify Purchases                                      |  |            |
| 4.4    | Franciscan Physicians Hospital Nonpriority Creditor's Name                                  | Last 4 digits of account number                               |  | \$262.00   |
|        | 7905 Calumet Ave<br>Munster, IN 46321-1298  | When was the debt incurred?                                   | 8/16   |            |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.                         | As of the date you file, the claim i                          | s: Check all that apply                      |            |
|        | ■ Debtor 1 only   | ☐ Contingent  |  |            |
|        | ☐ Debtor 2 only   | ☐ Unliquidated  |  |            |
|        | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |            |
|        | $\square$ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                 | I claim:                                     |            |
|        | ☐ Check if this claim is for a community  | ☐ Student loans   |  |            |
|        | debt Is the claim subject to offset?  | Obligations arising out of a sepa report as priority claims   | ration agreement or divorce that you did not |            |
|        | No  | Debts to pension or profit-sharin                             | g plans, and other similar debts             |            |
|        | Yes   | ·   | 01   |            |
|        | <b>□</b> 162  | Other. Specify Medical  |  |            |

Document Page 23 of 58 Case number (if know)

Desc Main

Debtor 1 George D. Litke 4.5 SYNCB/Lenscrafters Last 4 digits of account number 4603 \$367.00 Nonpriority Creditor's Name PO Box 965036 When was the debt incurred? 11/15 - 8/16 Orlando, FL 32896-5036 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Purchases ☐ Yes 4.6 Teamster Privilege Credit Card Last 4 digits of account number \$5,443.00 Nonpriority Creditor's Name PO Box 88000 When was the debt incurred? 8/16 Baltimore, MD 21288 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital 1 Bank Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: General Correspondence Part 2: Creditors with Nonpriority Unsecured Claims Po Box 30285 Salt Lake City, UT 84130 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Bank Usa N Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 15000 Capital One Dr Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23238 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Capital One Bank, N.A. Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 71083 Part 2: Creditors with Nonpriority Unsecured Claims Charlotte, NC 28272-1083 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Chasecard Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bankruptcy Department** Part 2: Creditors with Nonpriority Unsecured Claims PO Box 15298

Wilmington, DE 19850

Document

Page 24 of 58
Case number (if know)

| Debtor 1 George D. Litke                | Document Pa                        | Case number (if know)                                 |
|---|------------------------------------|---|
|   | Last 4 digits of account number    |   |
| Name and Address                        | On which entry in Part 1 or Part 2 | 2 did you list the original creditor?                 |
| Discover Bank                           | Line 4.3 of (Check one):           | ☐ Part 1: Creditors with Priority Unsecured Claims    |
| PO Box 15316<br>Wilmington, DE 19850    |                                    | Part 2: Creditors with Nonpriority Unsecured Claims   |
| Willington, DE 13030                    | Last 4 digits of account number    |   |
| Name and Address                        | On which entry in Part 1 or Part 2 | 2 did you list the original creditor?                 |
| GECRB/Lens                              | Line 4.5 of (Check one):           | ☐ Part 1: Creditors with Priority Unsecured Claims    |
| PO Box 981439<br>El Paso, TX 79998-1439 |                                    | Part 2: Creditors with Nonpriority Unsecured Claims   |
| EI F 450, 1 \( \text{13390-1439}        | Last 4 digits of account number    |   |
| Name and Address                        | On which entry in Part 1 or Part 2 | 2 did you list the original creditor?                 |
| GECRB/Lens Crafters                     | Line 4.5 of (Check one):           | ☐ Part 1: Creditors with Priority Unsecured Claims    |
| Attn: Bankruptcy Po Box 103104          |                                    | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| Roswell, GA 30076                       |                                    |   |
| Noowon, Cry odoro                       | Last 4 digits of account number    |   |
| Name and Address                        | On which entry in Part 1 or Part 2 | 2 did you list the original creditor?                 |
| Teamster Privilege Credit Card          | Line 4.6 of (Check one):           | ☐ Part 1: Creditors with Priority Unsecured Claims    |
| PO Box 80027                            |                                    | Part 2: Creditors with Nonpriority Unsecured Claims   |
| Salinas, CA 93912-0027                  | Last 4 digits of account number    |   |

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     | 1  | Total Claim |
|-----------------------|-----|---|-----|----|-------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total                 |     |   |     |    |             |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00        |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00        |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00        |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00        |
|                       | 6f. | Student loans   | 6f. | \$ | Total Claim |
| Total claims          |     |   |     |    | 0.00        |
| from Part 2           | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00        |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00        |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 25,329.00   |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 25,329.00   |

|                     |                          | DOCUME            | eni Page 75 oi 57 | <u>8</u> |                                      |
|---------------------|--------------------------|-------------------|-------------------|----------|--------------------------------------|
| Fill in this infor  | mation to identify your  | case:             |                   |          |                                      |
| Debtor 1            | George D. Litke          |                   |                   |          |                                      |
|                     | First Name               | Middle Name       | Last Name         |          |                                      |
| Debtor 2            |                          |                   |                   |          |                                      |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name         |          |                                      |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS       |          |                                      |
| Case number         |                          |                   |                   |          |                                      |
| (if known)          |                          |                   |                   |          | ☐ Check if this is an amended filing |

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company wit | h whom you have the c<br>er, Street, City, State and ZIP Co | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------|---|-------------------|---|
| 2.1 |           |             |   |                   |   |
|     | Name      |             |   |                   | _                                       |
|     | Number    | Street      |   |                   | _                                       |
|     | City      |             | State   | ZIP Code          | _                                       |
| 2.2 |           |             |   |                   |   |
|     | Name      |             |   |                   | _                                       |
|     | Number    | Street      |   |                   | _                                       |
|     | City      |             | State   | ZIP Code          | <del>_</del>                            |
| 2.3 | Oity      |             | Oldio   | Zii Gode          |   |
|     | Name      |             |   |                   | _                                       |
|     | Number    | Street      |   |                   | _                                       |
|     | City      |             | State   | ZIP Code          | _                                       |
| 2.4 | O.t.y     |             |   | 2 0000            |   |
| 2.4 | Name      |             |   |                   | _                                       |
|     | Number    | Street      |   |                   | _                                       |
|     | City      |             | State   | ZIP Code          | _                                       |
| 2.5 | •         |             |   |                   |   |
|     | Name      |             |   |                   | _                                       |
|     | Number    | Street      |   |                   | _                                       |
|     | City      |             | State   | ZIP Code          | <del>_</del>                            |
|     | -ity      |             | Oldio   |                   |   |

|                       | Case 10-35077 L   | Docume Docume  |                         | 11/02/10 14.40.04<br>If 58                        | DESC MAIII<br>11/02/16 2:22P          |
|-----------------------|---|--|-------------------------|---|---------------------------------------|
| Fill in thi           | is information to identify your   | case:  |                         |   |                                       |
| Debtor 1              | George D. Litke   | Middle Name  | Last Name               |   |                                       |
| Debtor 2              |   | Middle Name  | Last Name               |   |                                       |
| (Spouse if, f         |   | Middle Name  | Last Name               |   |                                       |
| United St             | tates Bankruptcy Court for the:   | NORTHERN DISTRICT                                    | OF ILLINOIS             |   |                                       |
| Case nur              | mber  |  |                         |   |                                       |
| (if known)            |   |  |                         |   | Check if this is an<br>amended filing |
| ٠ (ر: - : -           | - L <b>C</b> 400LL  |  |                         |   | •                                     |
|                       | al Form 106H  | alat aa  |                         |   |                                       |
| scne                  | dule H: Your Cod  | eptors   |                         |   | 12/15                                 |
| II it out,<br>our nam | re filing together, both are equivand number the entries in the ne and case number (if known) o you have any codebtors? (if | boxes on the left. Attach<br>. Answer every question | the Additional Page to  | o this page. On the top of                        |                                       |
|                       |   | , o a a. og a jo o a o o ,                           | ao not mot omno: opouco |   |                                       |
| ■ No                  |   |  |                         |   |                                       |
| □ Y€                  | es  |  |                         |   |                                       |
|                       | ithin the last 8 years, have you<br>ona, California, Idaho, Louisiana,  |  |                         |   | tes and territories include           |
| ■ No                  | o. Go to line 3.  |  |                         |   |                                       |
| □ Ye                  | es. Did your spouse, former spou  | use, or legal equivalent live                        | e with you at the time? |   |                                       |
| in lin<br>Form        | olumn 1, list all of your codebt<br>ne 2 again as a codebtor only i<br>n 106D), Schedule E/F (Official<br>Column 2.         | f that person is a guaran                            | tor or cosigner. Make s | sure you have listed the ci                       | reditor on Schedule D (Official       |
|                       | Column 1: Your codebtor<br>Name, Number, Street, City, State and ZI   | P Code   |                         | Column 2: The credito<br>Check all schedules that | or to whom you owe the debt at apply: |
| 3.1                   |   |  |                         | ☐ Schedule D, line                                |                                       |
|                       | Name  |  |                         | ☐ Schedule E/F, line                              |                                       |
|                       |   |  |                         | ☐ Schedule G, line _                              |                                       |
|                       | Number Street   |  |                         | <u> </u>  |                                       |
|                       | City  | State  | ZIP Code                |   |                                       |
| 3.2                   |   |  |                         | ☐ Schedule D, line                                |                                       |
|                       | Name  |  |                         | ☐ Schedule E/F, line                              |                                       |
|                       |   |  |                         | ☐ Schedule G, line _                              |                                       |
|                       | Number Street   |  |                         | _   |                                       |

State

City

ZIP Code

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 27 of 58 Page 27 of 58

| Fill               | in this information t                                    | o identify your ca                                       | ase:   |                          |                             |                    |                |                     |                          |                          |   |
|--------------------|--|--|--|--------------------------|-----------------------------|--------------------|----------------|---------------------|--------------------------|--------------------------|---|
| Deb                | otor 1   | George D. L  | itke   |                          |                             |                    |                |                     |                          |                          |   |
|                    | otor 2<br>buse, if filing)                               |  |  |                          |                             |                    |                |                     |                          |                          |   |
| Uni                | ted States Bankrup                                       | tcy Court for the  | : NORTHERN DISTRIC   | CT OF ILL                | INOIS                       |                    |                |                     |                          |                          |   |
|                    | se number  |  |  | -                        |                             |                    |                |                     |                          | nt showing               | g postpetition chapter<br>llowing date: |
| O                  | fficial Form   | 106I   |  |                          |                             |                    |                | <u> </u>            | /M / DD/ Y               | YYY                      | J                                       |
| S                  | chedule I:   | Your Inc   | ome  |                          |                             |                    |                | •                   | , 55, 1                  |                          | 12/1                                    |
| sup<br>spo<br>atta | plying correct infouse. If you are segon as separate she | ormation. If you<br>parated and you                      | sible. If two married peo<br>are married and not filir<br>r spouse is not filing w<br>On the top of any additi | ng jointly<br>ith you, c | /, and your<br>lo not inclι | spouse<br>Ide info | is liv         | ing with<br>on abou | you, inclu<br>t your spo | ıde inform<br>use. If mo | ation about your re space is needed,    |
| 1.                 | Fill in your emplinformation.                            | oyment   |  | Debto                    | r 1                         |                    |                |                     | Debtor 2                 | or non-fil               | ing spouse                              |
|                    | If you have more   |  | Employment status  | ■ Em                     | ployed                      |                    |                |                     | ☐ Emplo                  | yed                      |   |
|                    | information about  | separate page with Employment status on about additional |  | ☐ Not employed           |                             |                    | ☐ Not employed |                     |                          |                          |   |
|                    | employers.   |  | Occupation   | Spott                    | er                          |                    |                |                     |                          |                          |   |
|                    | Include part-time self-employed wo                       |  | Employer's name  | Waste                    | e Managei                   | ment               |                |                     |                          |                          |   |
|                    | Occupation may or homemaker, if                          |  | Employer's address   |                          | N. Hooker<br>Igo, IL 606    |                    |                |                     |                          |                          |   |
|                    |  |  | How long employed t  | here?                    | 27 Yea                      | rs                 |                |                     |                          |                          |   |
| Par                | rt 2: Give De  | tails About Mor  | thly Income  |                          |                             |                    |                |                     |                          |                          |   |
| spou<br>If yo      | use unless you are<br>ou or your non-filing              | separated. spouse have mo                                | ate you file this form. If   |                          | Ū                           | ·                  | •              |                     |                          |                          | , ,                                     |
| more               | e space, attach a s                                      | eparate sheet to   | this form.   |                          |                             |                    |                |                     |                          |                          |   |
|                    |  |  |  |                          |                             |                    |                | For De              | btor 1                   | For Deb<br>non-filir     | tor 2 or<br>ng spouse                   |
| 2.                 |  |  | ry, and commissions (b<br>calculate what the monthl  |                          |                             | 2.                 | \$             | 4                   | ,912.00                  | \$                       | N/A                                     |

Schedule I: Your Income

0.00

4,912.00

+\$

\$

N/A

page 1

N/A

Estimate and list monthly overtime pay.

Official Form 106I

Calculate gross Income. Add line 2 + line 3.

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 28 of 58  $^{11/02/16}$ 

| Deb | tor 1          | George D. Litke   | -       | Case r | number (if known)        |        |                           |          |
|-----|----------------|---|---------|--------|--------------------------|--------|---------------------------|----------|
|     |                |   |         |        | Debtor 1                 | non-fi | ebtor 2 or<br>ling spouse |          |
|     | Copy           | y line 4 here   | 4.      | \$     | 4,912.00                 | \$     | N/A                       |          |
| 5.  | List           | all payroll deductions:   |         |        |                          |        |                           |          |
|     | 5a.            | Tax, Medicare, and Social Security deductions   | 5a.     | \$     | 1,349.00                 | \$     | N/A                       |          |
|     | 5b.            | Mandatory contributions for retirement plans  | 5b.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 5c.            | Voluntary contributions for retirement plans  | 5c.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 5d.            | Required repayments of retirement fund loans  | 5d.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 5e.            | Insurance   | 5e.     | \$     | 141.00                   | \$     | N/A                       |          |
|     | 5f.            | Domestic support obligations  | 5f.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 5g.            | Union dues  | 5g.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 5h.            | Other deductions. Specify: Union D.R.I.V.E.   | 5h.+    | \$     | 4.00                     | + \$   | N/A                       |          |
| 6.  |                | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.      | \$     | 1,494.00                 | \$     | N/A                       |          |
| 7.  | Calc           | ulate total monthly take-home pay. Subtract line 6 from line 4.   | 7.      | \$     | 3,418.00                 | \$     | N/A                       |          |
| 8.  | List 8a.       | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total             |         |        |                          |        |                           |          |
|     |                | monthly net income.   | 8a.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 8b.            | Interest and dividends  | 8b.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 8c.            | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 8d.            | Unemployment compensation   | 8d.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 8e.            | Social Security   | 8e.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 8f.            | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: | 8f.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 8g.            | Pension or retirement income  | 8g.     | \$     | 0.00                     | \$     | N/A                       |          |
|     | 8h.            | Other monthly income. Specify:  | 8h.+    | \$     | 0.00                     | + \$   | N/A                       |          |
| 9.  | Add            | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.      | \$     | 0.00                     | \$     | N/A                       |          |
| 10  | Calc           | ulate monthly income. Add line 7 + line 9.  | 10. \$  | ,      | 3,418.00 + \$            |        | N/A = \$                  | 3,418.00 |
| 10. |                | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | Ιο.   Ψ |        | ,410.00 ·   <sup>4</sup> |        |                           | 3,410.00 |
| 11. | State<br>Inclu | de all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your rifiends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a        | depen   | •      | •                        | •      | nedule J.<br>11. +\$      | 0.00     |
| 12. |                | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines  |         |        |                          |        | 12. \$Combin              |          |
| 12  | Do v           | ou expect an increase or decrease within the year after you file this form  | 2       |        |                          |        | monthly                   | income   |
| ıJ. | y              | No.   |         |        |                          |        |                           |          |
|     | _              | Yes. Explain:   |         |        |                          |        |                           |          |
|     |                | i oo. Explain.  |         |        |                          |        |                           | ,        |

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 29 of 58  $^{11/02/16}$  Entered 11/02/16 14:46:04 Desc Main

| Fill  | in this informa                                  | tion to identify yo                                     | ur case.                            |   |   |                      |                      |                                       |  |            |  |
|---|--|---|-------------------------------------|---|---|----------------------|----------------------|---------------------------------------|--|------------|--|
|   | otor 1   | George D. Li  |                                     |   |   | Cl                   | neck                 | if this is:                           |  |            |  |
|   |  | Occinge D. Li   | inc                                 |   |   |                      |                      | n amended filing                      |  |            |  |
|   | otor 2   |   |                                     |   |   |                      |                      |                                       | ing postpetition chap                        | ter        |  |
| (Spo  | ouse, if filing)                                 |   |                                     |   |   |                      | 1;                   | 3 expenses as of t                    | he following date:                           |            |  |
| Unit  | ed States Bankr                                  | ruptcy Court for the:                                   | NORTH                               | HERN DISTRICT OF ILL                                    | INOIS   | MM / DD / YYYY       |                      |                                       |  |            |  |
|   | e number<br>nown)                                |   |                                     |   |   |                      |                      |                                       |  |            |  |
| Of  | fficial Fo                                       | rm 106J   |                                     |   |   |                      |                      |                                       |  |            |  |
| S   | chedule  | J: Your I   | Exper                               | nses  |   |                      |                      |                                       |  | 12/15      |  |
| Be<br>info<br>nur   | as complete a<br>ormation. If m<br>mber (if know | and accurate as<br>lore space is nee<br>n). Answer ever | possible<br>eded, atta<br>y questio | . If two married people ich another sheet to thi        |   |                      |                      |                                       |  |            |  |
| Par<br>1.   | t 1: Descr<br>Is this a join                     | ibe Your House  | hold                                |   |   |                      |                      |                                       |  |            |  |
| ١.  | No. Go to  |   |                                     |   |   |                      |                      |                                       |  |            |  |
|   | ☐ Yes. Doe                                       | s Debtor 2 live i                                       | n a separ                           | ate household?  |   |                      |                      |                                       |  |            |  |
|   | □ N  | -   | t file Offici                       | ial Form 106J-2, <i>Expens</i>                          | es for Separate House                                 | ehold of D           | ebto                 | r 2.                                  |  |            |  |
| 2.  | Do you have                                      | e dependents?   | □ No                                |   | •   |                      |                      |                                       |  |            |  |
|   | Do not list Do Debtor 2.                         | •   | Yes.                                | Fill out this information for each dependent            | Dependent's relati<br>Debtor 1 or Debtor              |                      |                      | Dependent's age                       | Does dependent live with you?                |            |  |
|   | Do not state                                     | the   |                                     |   |   |                      |                      |                                       | □ No   |            |  |
|   | dependents                                       | names.  |                                     |   | Mother  |                      |                      |                                       | Yes  |            |  |
|   |  |   |                                     |   |   |                      |                      |                                       | □ No   |            |  |
|   |  |   |                                     |   |   |                      |                      |                                       | Yes  |            |  |
|   |  |   |                                     |   |   |                      |                      |                                       | □ No   |            |  |
|   |  |   |                                     |   |   |                      |                      |                                       | ☐ Yes  |            |  |
|   |  |   |                                     |   |   |                      |                      |                                       | □ No<br>□ Yes                                |            |  |
| 3.  | expenses of                                      | oenses include<br>f people other th<br>d your depender  | nan <sub>—</sub>                    | No<br>Yes   |   |                      |                      |                                       | Li Tes                                       |            |  |
|   |  | ate Your Ongoir   |                                     |   |   |                      |                      |                                       |  |            |  |
| exp   | imate your ex<br>enses as of a<br>blicable date. | openses as of your date after the b                     | our bankr<br>pankrupto              | uptcy filing date unless<br>y is filed. If this is a su | s you are using this fo<br>pplemental <i>Schedule</i> | orm as a<br>J, check | sup <sub> </sub> the | plement in a Cha<br>box at the top of | pter 13 case to repo<br>the form and fill in | ort<br>the |  |
| the   | value of such                                    | h assistance and  |                                     | government assistance<br>cluded it on <i>Schedule I</i> |   |                      |                      | Your expe                             | enses  |            |  |
| (Oi   | ficial Form 10                                   | юі.)  |                                     |   |   |                      |                      | тош охро                              |  |            |  |
| 4. The rental or home ownership expenses payments and any rent for the ground or lo |  |   |                                     |   | . Include first mortgage                              | e<br>4.              | \$                   |                                       | 953.00                                       |            |  |
|   | If not includ                                    | led in line 4:  |                                     |   |   |                      |                      |                                       |  |            |  |
|   | 4a. Real e                                       | estate taxes  |                                     |   |   | 4a.                  | \$                   |                                       | 0.00   |            |  |
|   |  | rty, homeowner's  | s, or renter                        | 's insurance  |   | 4b.                  |                      |                                       | 0.00   |            |  |
|   |  |   | •                                   | upkeep expenses   |   | 4c.                  |                      |                                       | 0.00   |            |  |
| _   |  | owner's associati                                       |                                     |   | h   | 4d.                  |                      |                                       | 0.00   |            |  |
| 5.  | Additional n                                     | ποrtgage payme  | ents for yo                         | <b>our residence</b> , such as l                        | nome equity loans                                     | 5.                   | \$                   |                                       | 0.00   |            |  |

| Deb | tor 1   | George I      | D. Litke   | Case num                | Case number (if known) |                             |  |  |  |  |
|-----|---------|---------------|--|-------------------------|------------------------|-----------------------------|--|--|--|--|
| 6.  | Utiliti | ies:          |  |                         |                        |                             |  |  |  |  |
| ٥.  | 6a.     |               | heat, natural gas  | 6a.                     | \$                     | 295.00                      |  |  |  |  |
|     | 6b.     | •             | wer, garbage collection  | 6b.                     |                        | 150.00                      |  |  |  |  |
|     | 6c.     |               | e, cell phone, Internet, satellite, and cable services   | 6c.                     | \$                     | 200.00                      |  |  |  |  |
|     | 6d.     | Other. Spe    |  | 6d.                     | ·                      | 0.00                        |  |  |  |  |
| 7.  |         |               | ekeeping supplies  | 7.                      | ·                      | 279.00                      |  |  |  |  |
| 8.  |         |               | children's education costs   | 8.                      | \$                     | 0.00                        |  |  |  |  |
| 9.  |         |               | ry, and dry cleaning   | 9.                      | \$                     | 0.00                        |  |  |  |  |
|     |         |               | products and services  | 10.                     | \$                     | 0.00                        |  |  |  |  |
|     |         |               | ntal expenses  | 11.                     | ·                      | 130.00                      |  |  |  |  |
|     |         |               | Include gas, maintenance, bus or train fare.   |                         | ·                      |                             |  |  |  |  |
|     |         |               | ar payments.   | 12.                     | \$                     | 140.00                      |  |  |  |  |
| 13. | Ente    | rtainment, o  | clubs, recreation, newspapers, magazines, and books  | 13.                     | \$                     | 0.00                        |  |  |  |  |
| 14. | Char    | itable conti  | ributions and religious donations  | 14.                     | \$                     | 0.00                        |  |  |  |  |
| 15. | Insur   | rance.        |  |                         |                        |                             |  |  |  |  |
|     |         |               | surance deducted from your pay or included in lines 4 or 2   |                         |                        |                             |  |  |  |  |
|     | 15a.    | Life insura   | nce  | 15a.                    | ·                      | 38.00                       |  |  |  |  |
|     | 15b.    | Health insu   | urance   | 15b.                    | \$                     | 0.00                        |  |  |  |  |
|     | 15c.    | Vehicle ins   | surance  | 15c.                    | \$                     | 183.00                      |  |  |  |  |
|     | 15d.    | Other insu    | rance. Specify:  | 15d.                    | \$                     | 0.00                        |  |  |  |  |
| 16. |         |               | clude taxes deducted from your pay or included in lines 4  |                         |                        |                             |  |  |  |  |
|     | Spec    |               |  | 16.                     | \$                     | 0.00                        |  |  |  |  |
| 17. |         |               | ease payments:   |                         | •                      |                             |  |  |  |  |
|     |         |               | ents for Vehicle 1   | 17a.                    | · -                    | 0.00                        |  |  |  |  |
|     |         |               | ents for Vehicle 2   | 17b.                    | ·                      | 0.00                        |  |  |  |  |
|     |         | Other. Spe    | ·  | 17c.                    | ·                      | 0.00                        |  |  |  |  |
|     |         | Other. Spe    |  | 17d.                    | \$                     | 0.00                        |  |  |  |  |
| 18. |         |               | of alimony, maintenance, and support that you did no   |                         | \$                     | 0.00                        |  |  |  |  |
| 10  |         |               | your pay on line 5, <i>Schedule I, Your Income</i> (Official Fo<br>s you make to support others who do not live with you   | orini 100ij.            | \$                     | 0.00                        |  |  |  |  |
| 13. | Spec    |               | s you make to support others who do not live with you  | 19.                     | Ψ                      | 0.00                        |  |  |  |  |
| 20  |         | · —           | erty expenses not included in lines 4 or 5 of this form  |                         | our Income             |                             |  |  |  |  |
| 20. |         |               | s on other property  | 20a.                    |                        | 0.00                        |  |  |  |  |
|     |         | Real estate   |  | 20b.                    |                        | 0.00                        |  |  |  |  |
|     |         |               | nomeowner's, or renter's insurance   | 20c.                    | ·                      | 0.00                        |  |  |  |  |
|     |         |               | ice, repair, and upkeep expenses   | 20d.                    | ·                      | 0.00                        |  |  |  |  |
|     |         |               | er's association or condominium dues   | 20a.<br>20e.            | ·                      | 0.00                        |  |  |  |  |
| 21  |         | r: Specify:   | ers association of condominatin dues   |                         | Ψ<br>+\$               |                             |  |  |  |  |
| ۷١. | Othe    | ii. Specily.  |  |                         | +φ                     | 0.00                        |  |  |  |  |
| 22. | Calc    | ulate your r  | monthly expenses   |                         |                        |                             |  |  |  |  |
|     | 22a.    | Add lines 4   | through 21.  |                         | \$                     | 2,368.00                    |  |  |  |  |
|     | 22b.    | Copy line 22  | 2 (monthly expenses for Debtor 2), if any, from Official For   | m 106J-2                | \$                     |                             |  |  |  |  |
|     | 22c. /  | Add line 22a  | a and 22b. The result is your monthly expenses.  |                         | \$                     | 2,368.00                    |  |  |  |  |
|     |         |               | , , ,  |                         | · —                    |                             |  |  |  |  |
| 23. |         | •             | monthly net income.  |                         | _                      |                             |  |  |  |  |
|     |         |               | 12 (your combined monthly income) from Schedule I.   | 23a.                    | ·                      | 3,418.00                    |  |  |  |  |
|     | 23b.    | Copy your     | monthly expenses from line 22c above.  | 23b.                    | -\$                    | 2,368.00                    |  |  |  |  |
|     | 00-     | 0.4.4         | and the same and t |                         |                        |                             |  |  |  |  |
|     | 23c.    |               | our monthly expenses from your monthly income.   | 23c.                    | \$                     | 1,050.00                    |  |  |  |  |
|     |         | THE TESUIT    | is your monthly net income.  | 200.                    |                        | ,                           |  |  |  |  |
| 24. | Do ve   | ou expect a   | an increase or decrease in your expenses within the your   | ear after you file this | s form?                |                             |  |  |  |  |
|     | For ex  | xample, do yo | ou expect to finish paying for your car loan within the year or do you   |                         |                        | se or decrease because of a |  |  |  |  |
|     |         |               | terms of your mortgage?  |                         |                        |                             |  |  |  |  |
|     | ■ No    | 0.            |  |                         |                        |                             |  |  |  |  |
|     | □Y€     | es.           | Explain here:  |                         |                        |                             |  |  |  |  |

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 31 of 58  $^{11/02/16}$  2:22PM

| FIII III UIIS IIIIOI           | rmation to identify your | case:                     |                             |  |      |
|--------------------------------|--------------------------|---------------------------|-----------------------------|--|------|
| Debtor 1                       | George D. Litke          |                           |                             |  |      |
|                                | First Name               | Middle Name               | Last Name                   |  |      |
| Debtor 2                       |                          |                           |                             |  |      |
| (Spouse if, filing)            | First Name               | Middle Name               | Last Name                   |  |      |
| United States B                | ankruptcy Court for the: | NORTHERN DISTRICT         | OF ILLINOIS                 |  |      |
| Case number                    |                          |                           |                             |  |      |
| (if known)                     |                          |                           |                             | ☐ Check if this is an amended filing   |      |
| Official For<br><b>Declara</b> |                          | ın Individual             | Debtor's Scl                | hedules 1  | 2/15 |
| If two married p               | eople are filing togethe | r, both are equally respo | nsible for supplying corre  | rect information.  |      |
| obtaining mone                 |                          | n connection with a bank  |                             | . Making a false statement, concealing property, on fines up to \$250,000, or imprisonment for up to |      |
| Sig                            | gn Below                 |                           |                             |  |      |
| Did you pa                     | ay or agree to pay some  | one who is NOT an attor   | ney to help you fill out ba | ankruptcy forms?   |      |
| ■ No                           |                          |                           |                             |  |      |
| ☐ Yes.                         | Name of person           |                           |                             | Attach Bankruptcy Petition Preparer's Noti   | ice, |

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

| ( | /s/ George D. Litke                   |
|---|---------------------------------------|
|   | George D. Litke Signature of Debtor 1 |

Signature of Debtor 2

Date November 2, 2016

Date

Official Form 106Dec

Declaration, and Signature (Official Form 119)

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 32 of 58 Page 32 of 58

| Fil               | l in this inforr  | nation to identify you                                  | r case:  |   |  |   |  |  |  |  |
|-------------------|---|---|--|---|--|---|--|--|--|--|
| De                | btor 1  | George D. Litke   |  |   |  |   |  |  |  |  |
| De                | btor 2  | First Name  | Middle Name  | Last Name   |  |   |  |  |  |  |
| 1 -               | ouse if, filing)  | First Name  | Middle Name  | Last Name   |  |   |  |  |  |  |
| Un                | ited States Ba  | nkruptcy Court for the:                                 | NORTHERN DISTRICT (  | OF ILLINOIS   |  |   |  |  |  |  |
|                   | se number _<br>nown)  |   |  |   |  | Check if this is an amended filing                    |  |  |  |  |
| St<br>Be<br>info  | as complete a   | of Financial and accurate as possinore space is needed, | Affairs for Individual liberal | are filing together, both are                         | equally responsible for su                 |   |  |  |  |  |
|                   |   | n). Answer every que:<br>Details About Your Ma          | stion.<br>arital Status and Where You  | ı Lived Before  |  |   |  |  |  |  |
| 1.                | •   | r current marital statu                                 |  |   |  |   |  |  |  |  |
|                   | ☐ Married ■ Not ma  |   |  |   |  |   |  |  |  |  |
| 2.                | During the last 3 years, have you lived anywhere other than where you live now? |   |  |   |  |   |  |  |  |  |
|                   | ■ No □ Yes. Lis   | st all of the places you I                              | ived in the last 3 years. Do no  | ot include where you live nov                         | <i>ı</i> .                                 |   |  |  |  |  |
|                   | Debtor 1 Pr   | rior Address:   | Dates Debtor 1 lived there   | Debtor 2 Prior Ac                                     | dress:                                     | Dates Debtor 2<br>lived there                         |  |  |  |  |
| <b>3.</b><br>stat |   |   | ver live with a spouse or leg<br>lifornia, Idaho, Louisiana, Ne  |   |  |   |  |  |  |  |
|                   | ■ No<br>□ Yes. Ma   | ake sure you fill out <i>Scl</i>                        | nedule H: Your Codebtors (O  | fficial Form 106H).                                   |  |   |  |  |  |  |
| Pa                | rt 2 Expla  | in the Sources of You                                   | r Income   |   |  |   |  |  |  |  |
| 4.                | Fill in the tota  | al amount of income yo                                  | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive   | all businesses, including part                        | time activities.                           | endar years?  |  |  |  |  |
|                   | □ No ■ Yes. Fil   | I in the details.                                       |  |   |  |   |  |  |  |  |
|                   |   |   | Debtor 1   |   | Debtor 2                                   |   |  |  |  |  |
|                   |   |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |  |  |  |  |
|                   |   | of current year untiled for bankruptcy:                 | ■ Wages, commissions, bonuses, tips  | \$29,471.00   | ☐ Wages, commissions, bonuses, tips        |   |  |  |  |  |

Official Form 107

☐ Operating a business

☐ Operating a business

Debtor 1 George D. Litke

Document Page 33 of 58
Case number (if known)

|    |   |                         |  | Debtor 1  |   | Debtor 2                           |            |   |
|----|---|-------------------------|--|---|---|------------------------------------|------------|---|
|    |   |                         |  | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)             | Sources of inc<br>Check all that a |            | Gross income<br>(before deductions<br>and exclusions) |
|    | For last calendar year:<br>(January 1 to December 31, 2015) |                         | ■ Wages, commissions, bonuses, tips \$64,235.00                  |   | ☐ Wages, com bonuses, tips  | missions,                          |            |   |
|    |   |                         |  | ☐ Operating a business  |   | ☐ Operating a                      | business   |   |
|    |   | dar year be<br>December |  | ■ Wages, commissions, bonuses, tips   | \$64,289.00   | ☐ Wages, com bonuses, tips         | missions,  |   |
|    |   |                         |  | ☐ Operating a business  |   | ☐ Operating a business             |            |   |
|    | winnings.  List each  | If you are fill         | ng a joint cas   | pensions; rental income; inter<br>se and you have income that y<br>ome from each source separat   | ou received together, list it                                     | only once under De                 | ebtor 1.   | I gambling and lottery                                |
|    | □ 163.  | i iii iii tile de       | italis.  | D.L.  |   | 21/                                |            |   |
|    |   |                         |  | Debtor 1 Sources of income Describe below.  | Gross income from each source (before deductions and exclusions)  | Sources of inc<br>Describe below.  |            | Gross income<br>(before deductions<br>and exclusions) |
| Pa | rt 3: Lis   | t Certain Pa            | yments You   | Made Before You Filed for I   | Bankruptcy  |                                    |            |   |
| 6. | Are eithe ☐ No.   | Neither De individual p | ebtor 1 nor E<br>orimarily for a<br>90 days befo<br>Go to line 7 | Is debts primarily consumer<br>bebtor 2 has primarily consu-<br>personal, family, or househol<br>are you filed for bankruptcy, die<br>cach creditor to whom you pai | mer debts. Consumer debtd purpose."  d you pay any creditor a tot | al of \$6,425* or moi              | re?        |   |
|    |   | * Subject               | not include  | editor. Do not include paymen<br>payments to an attorney for the<br>t on 4/01/19 and every 3 years  | nis bankruptcy case.  |                                    |            | •   |
|    | Yes.  |                         |  | r both have primarily consure you filed for bankruptcy, di  |   | al of \$600 or more?               |            |   |
|    |   | ■ No.                   | Go to line 7   | •   |   |                                    |            |   |
|    |   | □ <sub>Yes</sub>        | include pay  | each creditor to whom you pai<br>ments for domestic support ol<br>this bankruptcy case.   |   |                                    |            |   |
|    | Creditor  | 's Name and             | d Address  | Dates of payme  | nt Total amount paid  | Amount you still owe               | Was this p | ayment for  |

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 34 of 58 Case number (if known)

Debtor 1 George D. Litke

| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |                       |                   |                      |                    |                              |  |  |  |  |  |
|-----|--|-----------------------|-------------------|----------------------|--------------------|------------------------------|--|--|--|--|--|
|     | ■ No □ Yes. List all payments to an insider.   |                       |                   |                      |                    |                              |  |  |  |  |  |
|     | Insider's Name and Address   | Dates of payment      | Total amount paid | Amount you still owe | Reason for         | this payment                 |  |  |  |  |  |
| 8.  | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.  |                       |                   |                      |                    |                              |  |  |  |  |  |
|     | ■ No □ Yes. List all payments to an insider  |                       |                   |                      |                    |                              |  |  |  |  |  |
|     | Insider's Name and Address   | Dates of payment      | Total amount paid | Amount you still owe | Reason for         | this payment<br>litor's name |  |  |  |  |  |
| Pai | rt 4: Identify Legal Actions, Repossession   | ns. and Foreclosures  |                   |                      |                    |                              |  |  |  |  |  |
| 9.  | Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.  No Yes. Fill in the details.  |                       |                   |                      |                    |                              |  |  |  |  |  |
|     | Case title Case number   | Nature of the case    | Court or agency   |                      | Status of the case |                              |  |  |  |  |  |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?  Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address  Describe the Property  Date  Value of the   |                       |                   |                      |                    |                              |  |  |  |  |  |
|     |  | Explain what happened |                   |                      |                    | property                     |  |  |  |  |  |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts fr accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.  Creditor Name and Address  Describe the action the creditor took  Date action was   |                       |                   |                      |                    |                              |  |  |  |  |  |
|     |  | taken                 |                   |                      |                    |                              |  |  |  |  |  |
|     | _ '  | nother official?      |                   |                      |                    |                              |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details for each gift.   |                       |                   |                      |                    |                              |  |  |  |  |  |
|     | Gifts with a total value of more than \$600 per person   | Describe the gifts    |                   | Dates<br>the gi      | s you gave<br>ifts | Value                        |  |  |  |  |  |
|     | Person to Whom You Gave the Gift and Address:  |                       |                   |                      |                    |                              |  |  |  |  |  |

Desc Main Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04

Page 35 of 58 Case number (if known) Document Debtor 1 George D. Litke 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You David M. Siegel & Associates 5/9/2016 \$220.00 **Attorney Fees** 790 Chaddick Drive Wheeling, IL 60090 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Amount of Date payment Address transferred or transfer was payment made

Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

**Person Who Received Transfer** Description and value of Describe any property or Date transfer was payments received or debts **Address** property transferred made paid in exchange Person's relationship to you

Document Debtor 1 George D. Litke

Page 36 of 58 Case number (if known)

| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro  No Yes. Fill in the details.   |  | y property to a | self-settled trust or sir | nilar device of | which you are a                               |  |  |  |  |  |
|-----|---|--|-----------------|---------------------------|-----------------|---|--|--|--|--|--|
|     | Name of trust   | Description and value of the pro                       |                 |                           |                 | Date Transfer was nade                        |  |  |  |  |  |
| Par | Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  |  |                 |                           |                 |   |  |  |  |  |  |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details. |  |                 |                           |                 |   |  |  |  |  |  |
|     | Name of Financial Institution and<br>Address (Number, Street, City, State and ZIP<br>Code)  | Last 4 digits of account number                        | •               |                           | int was<br>d,   | Last balance<br>before closing or<br>transfer |  |  |  |  |  |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No  |  |                 |                           |                 |   |  |  |  |  |  |
|     | Yes. Fill in the details.   |  |                 |                           |                 |   |  |  |  |  |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   |  |                 | Describe the contents     |                 | Do you still have it?                         |  |  |  |  |  |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  No   |  |                 |                           |                 |   |  |  |  |  |  |
|     | Yes. Fill in the details.   |  |                 |                           |                 |   |  |  |  |  |  |
|     | Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)  Who else has or h to it?  Address (Number, State and ZIP Code)  |  |                 | Describe the contents     |                 | Do you still have it?                         |  |  |  |  |  |
| Par | 19: Identify Property You Hold or Control   | for Someone Else                                       |                 |                           |                 |   |  |  |  |  |  |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  |  |                 |                           |                 |   |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |  |                 |                           |                 |   |  |  |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the prop<br>(Number, Street, City, S<br>Code) |                 | Describe the property     |                 | Value   |  |  |  |  |  |
| Par | 10: Give Details About Environmental Info   | ormation   |                 |                           |                 |   |  |  |  |  |  |

#### E

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 16-35077

Debtor 1 George D. Litke

| 24.  | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No |   |  |                    |  |  |  |
|--|--|---|--|--------------------|--|--|--|
|  | Yes. Fill in the details.  |   |  |                    |  |  |  |
|  | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code)                                    | Environmental law, if you know it                                  | Date of notice     |  |  |  |
| 25.  | Have you notified any governmental unit of any   | release of hazardous material?  |  |                    |  |  |  |
|  | ■ No □ Yes. Fill in the details.   |   |  |                    |  |  |  |
|  | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code)                                    | Environmental law, if you know it                                  | Date of notice     |  |  |  |
| 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.                        |  |   |  |                    |  |  |  |
|  | ■ No □ Yes. Fill in the details.   |   |  |                    |  |  |  |
|  | Case Title<br>Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)                                       | Nature of the case   | Status of the case |  |  |  |
| Par  | 11: Give Details About Your Business or Con  | nections to Any Business  |  |                    |  |  |  |
| 27.  | Within 4 years before you filed for bankruptcy, or   | did you own a business or have an   | y of the following connections to any                              | business?          |  |  |  |
|  | ☐ A sole proprietor or self-employed in a t  | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time |  |                    |  |  |  |
|  | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |   |  |                    |  |  |  |
|  | ☐ A partner in a partnership   |   |  |                    |  |  |  |
|  | ☐ An officer, director, or managing execut   | tive of a corporation   |  |                    |  |  |  |
|  | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |   |  |                    |  |  |  |
|  | ■ No. None of the above applies. Go to Part 12.  |   |  |                    |  |  |  |
|  | ☐ Yes. Check all that apply above and fill in t  | pply above and fill in the details below for each business.   |  |                    |  |  |  |
|  | Business Name De Address   | scribe the nature of the business   | Employer Identification number<br>Do not include Social Security n |                    |  |  |  |
|  |  | me of accountant or bookkeeper  | Dates business existed   |                    |  |  |  |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your bus institutions, creditors, or other parties. |  |   |  | de all financial   |  |  |  |
|  | ■ No   |   |  |                    |  |  |  |
|  | Yes. Fill in the details below.  |   |  |                    |  |  |  |
|  | Name Address (Number, Street, City, State and ZIP Code)  | te Issued   |  |                    |  |  |  |

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main

Page 38 of 58
Case number (if known) Document Debtor 1 George D. Litke

| Part 12: Sign Below                                     |  |
|---|--|
|   | Affairs and any attachments, and I declare under penalty of perjury that the answers atement, concealing property, or obtaining money or property by fraud in connection 0, or imprisonment for up to 20 years, or both. |
| /s/ George D. Litke                                     |  |
| George D. Litke   | Signature of Debtor 2  |
| Signature of Debtor 1                                   |  |
| Date November 2, 2016                                   | Date   |
| Did you attach additional pages to Your Statement of Fi | nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?   |
| ■ No  | , , ,  |
| □ Yes   |  |
| Did you pay or agree to pay someone who is not an atto  | rney to help you fill out bankruptcy forms?  |
| ■ No  |  |
| $\square$ Yes. Name of Person Attach the Bankruptcy Pet | ition Preparer's Notice, Declaration, and Signature (Official Form 119).   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| С | hapter 7: | Liquidation        |
|---|-----------|--------------------|
|   | \$245     | filing fee         |
|   | \$75      | administrative fee |
| + | \$15      | trustee surcharge  |
|   | \$335     | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### 11/02/16 2:22PM

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$220.00 toward the flat fee, leaving a balance due of \$3,780.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$6.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: November 2, 2016                | again to appear an count to coject. |
|---------------------------------------|-------------------------------------|
| Signed:                               |                                     |
| /s/ George D. Litke                   | /s/ David M. Siegel                 |
| George D. Litke                       | David M. Siegel                     |
|                                       | Attorney for the Debtor(s)          |
| Debtor(s)                             |                                     |
| Do not sign this agreement if the amo | ounts are blank.                    |

**Local Bankruptcy Form 23c** 

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 49 of 58

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

| In r | e George D. Litke   |  | Case No.  |                                |         |
|------|---|--|---|--------------------------------|---------|
|      |   | Debtor(s)  | Chapter   | 13                             |         |
|      | DISCLOSURE OF C   | COMPENSATION OF ATTORNI  | EY FOR DE                                       | EBTOR(S)                       |         |
| 1.   | compensation paid to me within one year before  | kr. P. 2016(b), I certify that I am the attorney for<br>ore the filing of the petition in bankruptcy, or a<br>templation of or in connection with the bankrup  | greed to be paid                                | to me, for services rendered   | or to   |
|      | For legal services, I have agreed to accept   | pt   | \$  | 4,000.00                       |         |
|      | Prior to the filing of this statement I have  | e received   | \$  | 220.00                         |         |
|      | Balance Due   |  | \$  | 3,780.00                       |         |
| 2.   | \$310.00 of the filing fee has been paid.   |  |   |                                |         |
| 3.   | The source of the compensation paid to me w   | vas:   |   |                                |         |
|      | ■ Debtor □ Other (specify):   |  |   |                                |         |
| 4.   | The source of compensation to be paid to me   | is:  |   |                                |         |
|      | ■ Debtor □ Other (specify):   |  |   |                                |         |
| 5.   | ■ I have not agreed to share the above-disc   | losed compensation with any other person unle  | ss they are mem                                 | bers and associates of my lav  | w firm. |
|      |   | ed compensation with a person or persons who a<br>st of the names of the people sharing in the com   |   |                                | ı. A    |
| 6.   | In return for the above-disclosed fee, I have a   | agreed to render legal service for all aspects of  | the bankruptcy c                                | ease, including:               |         |
|      | <ul> <li>b. Preparation and filing of any petition, schec. Representation of the debtor at the meetind. [Other provisions as needed]</li> <li>Negotiations with secured cree</li> </ul> | n, and rendering advice to the debtor in determinedules, statement of affairs and plan which may ag of creditors and confirmation hearing, and an ditors to reduce to market value; exemples needed; preparation and filing of motifold goods. | y be required;  y adjourned hea  tion planning; | rings thereof;                 |         |
| 7.   |   | lisclosed fee does not include the following servin any dischargeability actions, judicial proceeding.   |   | es (except in Chapter 13       |         |
|      |   | CERTIFICATION  |   |                                |         |
| this | I certify that the foregoing is a complete state bankruptcy proceeding.   | ement of any agreement or arrangement for pays   | ment to me for re                               | epresentation of the debtor(s) | ) in    |
| 1    | November 2, 2016  | /s/ David M. Siegel  |   |                                |         |
| 1    | Date  | David M. Siegel  |   |                                |         |
|      |   | Signature of Attorney  David M. Siegel & As  | sociates  |                                |         |
|      |   | 790 Chaddick Drive   |   |                                |         |
|      |   | Wheeling, IL 60090   |   |                                |         |
|      |   | (847) 520-8100   |   |                                |         |

Name of law firm

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
    - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
      - The payment, if any, received by the attorney has been used to pay for work performed before the filing of the case. The advantage to the debtor is that services can be provided with little or no upfront legal fees.
    - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;

- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

| rep                | Any attorney retained to represent a debtor in a Chapter 13 case is responsible for presenting the debtor on all matters arising in the case unless otherwise ordered by the court. It all of the services outlined above, the attorney will be paid a flat fee of \$\frac{4000.00}{}.  |
|--------------------|---|
| 2.                 | In addition, the debtor will pay the filing fee in the case and other expenses of \$\frac{340.00}{}.  |
| 3.                 | Before signing this agreement, the attorney received \$ 560   |
|                    | toward the flat fee, leaving a balance due of \$3,440.00 and \$30.00 for expenses,  |
|                    | leaving a balance due of \$0  |
| atto<br>app<br>the | In extraordinary circumstances, such as extended evidentiary hearings or appeals, the briney may apply to the court for additional compensation for these services. Any such olication must be accompanied by an itemization of the services rendered, showing the date, time expended, and the identity of the attorney performing the services. The debtor must be wed with a copy of the application and notified of the right to appear in court to object. |
| Da                 | nte: 10 /18/14  |
| Sig                | ened:   |
| <u>}</u>           | Jun Jun   |
| Del                | btor(s) Attorney for the Debtor(s)  |
| Do                 | not sign this agreement if the amounts are blank.   |

Case 16-35077 Doc 1 Filed 11/02/16 Entered 11/02/16 14:46:04 Desc Main Document Page 56 of 58  $^{11/02/16}$  Entered 11/02/16 14:46:04 Desc Main

### United States Bankruptcy Court Northern District of Illinois

| In re | George D. Litke                           |   | Case No.                     |                |
|-------|---|---|------------------------------|----------------|
|       |   | Debtor(s)                                 | Chapter 13                   |                |
|       | V   | ERIFICATION OF CREDITOR M                 | <b>MATRIX</b>                |                |
|       |   | Number of                                 | f Creditors:                 | 21             |
|       | The above-named Debtor(s (our) knowledge. | s) hereby verifies that the list of credi | itors is true and correct to | the best of my |
| Date: | November 2, 2016                          | /s/ George D. Litke                       |                              |                |

Cap One Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130-0285

Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Capital One Bank, N.A. PO Box 71083 Charlotte, NC 28272-1083

Chase Attn: Bankruptcy Dept 800 Brooksedge Blvd Westerville, OH 43081

Chasecard
Bankruptcy Department
PO Box 15298
Wilmington, DE 19850

Cook County Clerk 118 N. Clark St., Room 112 Chicago, IL 60602-1332

Cook County Clerk 718 E 88th Place Chicago, IL 60619

Cook County Treasurer PO Box 4488 Carol Stream, IL 60197-4488

Cook County Treasurer PO Box 4468 Carol Stream, IL 60197-4468 Cook County Treasurer's Office Legal Department 118 North Clark Street, Room 112 Chicago, IL 60602-1332

Discover Bank PO Box 15316 Wilmington, DE 19850

Ditech Financial LLC PO BOX 6172 Rapid City, SD 57709

Ford Motor Credit PO Box 542000 Omaha, NE 68154

Franciscan Physicians Hospital 7905 Calumet Ave Munster, IN 46321-1298

GECRB/Lens PO Box 981439 El Paso, TX 79998-1439

GECRB/Lens Crafters Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

SYNCB/Lenscrafters PO Box 965036 Orlando, FL 32896-5036

Teamster Privilege Credit Card PO Box 88000 Baltimore, MD 21288

Teamster Privilege Credit Card PO Box 80027 Salinas, CA 93912-0027

Texas Bank Mortage CO PO BOX 101748 Fort Worth, TX 76185